

## (1) PLACE OF BIRTH

County of Sumter  
 Township of Smith  
 or  
 Inc. Town of .....  
 or  
 City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA  
 Bureau of Vital Statistics  
 State Board of Health

File No.—For State Registrar Only

9324

Registration District No. 4107Registered No. 32  
(For use of Local Registrar)

City of ..... (No. .... St. .... Ward) (If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Laura McFadden

(If child is not yet named, make supplemental report as directed)

(3) BOY OR GIRL Girl (4) Twin or Triplet No (5) Number in order of birth No (6) Age Previous Marriages No (7) DATE OF BIRTH Mar 27 1912  
 To be answered only in event of Twin or Triplet (Name of Month) (Day) (Year)

## FATHER

(8) FULL NAME John W Laws  
 (9) PRESENT POSTOFFICE OF FATHER Lynchburg, Va.  
 (10) COLOR OR RACE Negro (11) AGE AT LAST BIRTHDAY 27 (Year)  
 (12) BIRTHPLACE Sumter Co  
 (13) OCCUPATION Farming  
 (20) Number of children born to mother, including present birth 2

## MOTHER

(14) NAME BEFORE MARRIAGE Jeniver McFadden  
 (15) PRESENT POSTOFFICE OF MOTHER Lynchburg, Va.  
 (16) COLOR OR RACE Negro (17) AGE AT LAST BIRTHDAY 19 (Year)  
 (18) BIRTHPLACE Sumter Co  
 (19) OCCUPATION Housework  
 (21) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

(22) I hereby certify that I attended the birth of this child, who was alive at 3 P. on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Laura McFadden  
 (24) State whether Physician or Midwife Midwife Address of Physician or Midwife Lynchburg, Va.

Given name added from a supplemental report

(25) Witness (Signature of Witness necessary when question 22 is signed) J. B. McElwain  
 (26) Date 4-3-12 (27) Local Registrar

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once it must be reported as a birth. No report is desired of stillbirths before the fifth month of pregnancy.